

APR 102,2008

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Washin Qu.

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

14290	143						
OMB AP	PROVAL						
OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden							
hours per respons	e 16.00 E ONLY						
Prefix	Serial						
DATE RECEIVED							

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)
Subordinated Convertible Promissory Notes and the Capital Stock issuable upon conversion thereof (Amend No. 2)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Section 4(6) ULOE
Type of Filing: New Filing
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer.
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Socialmedian, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) 11 East 36th Street, #705, New York, NY 10016 (Number and Street, City, State, Zip Code) (917) 455-1020
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Numb OBO CODE OBO 44068
Same as above PROCES Same as above
Brief Description of Business
Internet media. APR 1 1.2008
Type of Business Organization THOMSON
corporation limited partnership, already former NANCIAL other (please specify):
business trust limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization: Month Year
GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer □ Director П General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Goldberg, Jason Business or Residence Address (Number and Street, City, State, Zip Code) 11 East 36th Street, #705, New York, NY 10016 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director ☐ General and/or Promoter ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director ☐ General and/or ☐ Beneficial Owner ☐ Executive Officer Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				<u>.</u>
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)	,		-
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			

Yes 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.	
2. What is the minimum investment that will be accepted from any individual?	N/A No
3. Does the offering permit joint ownership of a single unit?	\boxtimes
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individuals States).	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individuals States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individuals States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	CEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
		\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred	\$	\$
	Convertible Securities (including warrants)	\$1,000,000.00	\$417,500.00
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
		\$1,000,000.00	\$417,500.00
	Answer also in Appendix, Column 3, if filing under ULOE.	\$1,000,000.00	\$417,500.00
	This wer wise in Appendix, conditing, it thing under obots.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines Enter "0" if answer is "none" or "zero."	f	
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited Investors	7	\$417,500.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
	.,		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	f	D.11
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
			·
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.	,	
	Transfer Agent's Fees		<u>\$</u>
	Printing and Engraving Costs		<u>\$</u>
	Legal Fees.	\boxtimes	\$5,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	\boxtimes	\$5,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PE	OCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 at total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	SS	\$ <u>412,500.00</u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for ea of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the be to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to t issuer set forth in response to Part C — Question 4.b above.	ox	
		Payments to Officers, Directors & Affiliates	Payments to Others
	Salaries and fees	□ \$	□ \$
	Purchase of real estate	S	□ s
	Purchase, rental or leasing and installation of machinery and equipment	□ \$	S
	Construction or leasing of plant buildings and facilities	S	□ \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be us in exchange for the assets or securities of another issuer pursuant to a merger)	\$	□ s
	Repayment of indebtedness	□ \$	\$
	Working capital	□ \$	∑ \$412,500.00
	Other (specify):		
		□ s	\$
	Column Totals	\$	⊠ \$412,500.00
	Total Payments Listed (column totals added)	⋈ \$ 41	2,500.00

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Socialmedian, Inc.	Signature	Date
Name of Signer (Print or Type) Glen R. Van Ligten	Title or Signer (Print or Type) Secretary	
	ATTENTION	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 present	tly subject to any of the disqualification provisions of such rule?	Yes	No ⊠				
	Se	ee Appendix, Column 5, for state response.						
2.	 The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form I (17 CFR 239.500) at such times as required by state law. 							
3.	 The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. 							
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	e issuer has read this notification and knows the colly authorized person.	ontents to be true and has duly caused this notice to be signed on its be	chalf by the u	ndersigned				
	uer (Print or Type) Signicial median, Inc.	nature Date Man	nch 31	, 2008				
	Name (Print or Type) Glen R. Van Ligten Title (Print or Type) Secretary							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	4					· .
	Intend to non-acc invest	to sell to credited tors in ate -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	ecurity and te offering Type of investor and red in state amount purchased in State C-Item 1) (Part C-Item 2)		Type of investor and amount purchased in State			
State	Yes	No	Subordinated Convertible Promissory Notes and the Capital Stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	163	110	Conversion thereor		Atmodite		7tmount		7.0
AK					******	1			
AZ							<u> </u>		
AR									
CA		X	\$12,500.00	1	\$12,500.00	-0-	-0-		X
СО						1			
CT									
DE						<u> </u>	 		
DC	_	х	\$15,000.00	1	\$15,000.00	-0-	-0-		X
FL									•
GA									
HI									
ID									
IL									
IN							 -		
IA							···	ļ	
KS				·					
KY									
LA									
ME									
MD		X	\$75,000.00	2	\$75,000.00	-0-	-0-		X
МА				•				<u> </u>	
МІ									
MN				<u> </u>					
MS							<u></u> .		
мо						 			
MT									
NE									
NV	<u></u>								

APPENDIX

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-	Intend non-acc inves	to sell to credited tors in ate	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
G			Subordinated Convertible Promissory Notes and the Capital Stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
State NH	Yes	No	conversion thereof		Amount		Amount	1 63	110
NJ				-				\ <u>-</u>	
NM								1	
NY	*	<u> </u>					<u> </u>		
NC		x	\$25,000.00	· 1	\$25,000.00	-0-	-0-		X
ND			020,000,00		<u> </u>				
OH				<u> </u>			₩₹		
ОК	 			<u> </u>					
OR				· · ·					
PA									
RI									
SC									
SD									
TN									
TX									
UT				<u>.</u>				<u> </u>	
VΤ								ļ	
VA		X	\$250,000.00	1	\$250,000.00	-0-	-0-		X
WA		X	\$40,000.00	1	\$40,000.00	-0-	-0-		X
WV						<u> </u>		ļ	
WI		ļ						<u> </u>	<u> </u>
WY		ļ <u>.</u>		<u> </u>	ļ				ļ <u> </u>
PR					<u> </u>			<u> </u>	<u> </u>

